AMENDED IN SENATE AUGUST 4, 2008
AMENDED IN SENATE JUNE 18, 2008
AMENDED IN SENATE MAY 21, 2008
AMENDED IN SENATE MARCH 11, 2008
AMENDED IN SENATE JUNE 28, 2007
AMENDED IN ASSEMBLY APRIL 19, 2007
AMENDED IN ASSEMBLY APRIL 11, 2007

CALIFORNIA LEGISLATURE—2007–08 REGULAR SESSION

ASSEMBLY BILL

No. 671

Introduced by Assembly Member Beall

February 21, 2007

An act to add Section 14132.04 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 671, as amended, Beall. Medi-Cal: frequent users of health services.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health services. Eligibility determinations under the Medi-Cal program are made by county welfare departments.

This bill would, notwithstanding any other provision of law, expand Medi-Cal eligibility to include individuals who are frequent users of health services, as defined, provided the individual meets the medically $AB 671 \qquad \qquad -2 -$

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needy income eligibility requirements under the Medi-Cal program. The bill, no later than July 31, 2009, 2010, would require the department to submit any necessary application to the federal Centers—of for Medicare and Medicaid Services for a waiver to implement its provisions, and would provide that its provisions would be implemented only if federal financial participation is available and all necessary federal approvals are obtained.

By increasing the duties of local agencies responsible for making eligibility determinations, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 14132.04 is added to the Welfare and 2 Institutions Code, to read:
- 3 14132.04. (a) For purposes of this section, the following 4 definitions shall apply:
 - (1) "At risk of homelessness" means a history of homelessness, an absence of a permanent address over the last 12 months, or an absence of any current reliable source of income.
 - (2) "Frequent users of health services" means individuals who have undergone emergency department treatment on five or more occasions in the past 12 months or on eight or more occasions in the last 24 months and who have two or more of the following risk factors:
- (A) On one or more occasions within the last 24 months, the individual was diagnosed with chronic or life-threatening conditions that require management of symptoms, medications, health care, or changes in lifestyle or risk-related behaviors, which may include, but need not be limited to, HIV/AIDS, hepatitis,

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1 diabetes, heart disease, hypertension, emphysema, asthma, or 2 cancer.

- (B) On one or more occasions within the last 24 months, the individual was diagnosed with an Axis I or II mental disorder identified in the Diagnostic and Statistical Manual of Mental Disorders.
- (C) On one or more occasions within the last 24 months, the individual was diagnosed with a substance use disorder, including substance dependence and substance use problems, that interfere with the individual's health or appropriate utilization of health services.
- (D) The individual experiences consistent or intermittent nonadherence to prescribed treatment, resulting in significantly increased risk of avoidable hospitalization, emergency room visits, serious health consequences, or death.
- (E) The individual is currently experiencing homelessness or is at risk of homelessness.
- (3) "Homelessness" means lacking a fixed, regular, or adequate nighttime residence or a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations or a public or private place not designed for, or ordinarily used as, regular sleeping accommodation for human beings.
- (b) Notwithstanding any other provision of law, an individual who is a frequent user of health services, as defined in *paragraph* (2) of subdivision (a), and who is otherwise uninsured and ineligible for benefits under the Medi-Cal program, shall be covered under the Medi-Cal program, provided that the individual meets the medically needy income eligibility requirements pursuant to this chapter.
- (c) (1) No later than July 31, 2009 2010, the department shall submit any necessary application to the federal Centers—of for Medicare and Medicaid Services for a state plan amendment to implement this section.
- (2) This section shall only be implemented if federal financial participation is available, and if the federal Centers for Medicare and Medicaid Services approves the state plan amendment sought pursuant to paragraph (1).
- SEC. 2. If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to

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- local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.